

Insights

Bedsharing, Breastfeeding and Babies Dying: A Conversation Worth Having



“We have to remember that all mothers want what’s best for their babies. When we remember this, and keep it at the forefront of every conversation, we can become the trusted resources they need,” says NICHQ Senior Director Jennifer Ustianov, MS, BSN, RS, IBCLC.

Bedsharing can lead to longer [breastfeeding duration](#). It also leads to [more infant deaths](#). These opposing facts represent a major dilemma for those working to improve infant health. It becomes even trickier when we dive a little deeper. Breastfeeding also correlates with [lower sudden infant death syndrome](#) (SIDS) rates, the most common cause of post-neonatal infant deaths. In fact, after improving safe sleep environments, breastfeeding is one of the most important behaviors for reducing SIDS, and may [reduce the rate by more than 70 percent](#) if breastfeeding continues for at least 6 months, according to Cooper University Hospital’s Lori Feldman-Winter, MD, MPH, FAAP. In theory, this means that organizations working to reduce sleep-related infant deaths should consider strategies that promote breastfeeding. But, what does that mean when one of those strategies puts babies in danger?

Feldman-Winter, a pediatrician and safe sleep and breastfeeding expert who is currently working with NICHQ on the National Action Partnership to Promote Safe Sleep Improvement and

Source URL: <https://nichq.org/insight/bedsharing-breastfeeding-and-babies-dying-conversation-worth-having>

Innovation Network ([NAPPSS-IIN](#)), which aims to make safe sleep and breastfeeding the national norm, has decades of experience grappling with these questions.

“Despite the benefits to breastfeeding, the fact remains that there is [a five times greater risk](#) for infant death when bedsharing, when the infant is less than 3 months of age,” she notes. “This clear risk means we need to find ways to promote breastfeeding while ensuring it happens in a safe sleep environment.”

It starts by developing meaningful conversations between healthcare providers and mothers. These conversations can help mothers and caregivers better understand the risks of bedsharing while reinforcing the advantages of breastfeeding.

Below, we’ve identified three opportunities for health professionals to put Feldman-Winter’s advice into practice, and ultimately engage in conversations that can change infant health outcomes.

Address Social Determinants

Having successful conversations happens when health professionals know their audience. Data from the [Pregnancy Risk Assessment Monitoring System](#), shows that, as of 2015, African-Americans, Asian and Pacific Islanders, and American Indian and Alaskan Natives are at the highest risk for bedsharing. Similarly, 77 percent of teen mothers, an overwhelming majority, have shared a bed with their baby.

Interested in learning more about what’s been done to improve safe sleep practices across the country? In [a recent article](#), we offer insight on the progress that’s been made and what’s being done to leverage those successes. Or, [attend a free webinar](#), led by Founder of the Global Infant Safe Sleep Center, Stacy Scott, PhD, MPA, where she’ll share and model tactics for engaging in conversations that can reach all caregivers.

“Understanding who is at risk helps us target our conversations and frame them to be successful,” says Feldman-Winter. “We need to consider why they are more likely to bedshare and consider their perspective. Is it because they are less likely to have received safe-sleep education? Is there something unique to their situation, such as a cultural preference, that might make them inclined to bedshare? How might these preferences relate to their breastfeeding habits? Answering these questions will help us adopt an approach that’s more likely to resonate.”

Leverage Counseling Strategies

For conversations to be successful, they need to be judgement-free. There are several techniques that can encourage open dialogue. One technique Feldman-Winter promotes is motivational interviewing. Here, the nurse or doctor asks an open-ended question such as, what do you like about bedsharing? Or, why do you choose to bedshare? By proactively avoiding yes or no answers, health professionals can better understand mothers’ motivations and provide solutions that work for their family.

Another approach is L.O.V.E. With this technique, providers “Listen” to what the families are saying, ask those “Open-ended” questions, “Validate” their feelings and provide targeted “Education” that addresses families’ concerns.

Be Practical

“Health professionals need to be realistic in the advice they give,” says Feldman-Winter. “Our recommendations should consider the relative risks and benefits for each individual circumstance. We can build our conversations from there.”

For example, many mothers who bedshare may do so inadvertently. A common risk associated with breastfeeding in bed is that the mother may fall asleep after or while feeding her baby. While health professionals should always advise against bedsharing, that advice should be accompanied by recommendations that reduce infant risk if accidental sleep occurs, recommends Feldman-Winter. That could include reminding mothers to remove pillows, loose blankets and sheets from the bed, as well as moving the bed away from the wall to prevent entrapment.

Likewise, advice that targets high-risk situations can help reduce overall sleep-related deaths. “Remember to emphasize the danger for infants under four months of age, and infants that were premature or had a low birth weight,” Feldman-Winter advises.

Each of these tactics ensures meaningful conversations because each tactic engages with the circumstances and experiences unique to individual families. In doing so, they encourage mothers to openly discuss what they see as safe behavior, and thus more easily understand risks. And the more meaningful conversations that occur, the more babies who will sleep safely.

Looking for more strategies to reduce infant sleep deaths? Check out our [Infant Mortality Prevention Toolkit](#), which offers case studies and tactics for improving infant safe sleep practices in your community or state.